File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319

Fax: 515-281-4073



IA ETHICS AND CAMPAIGN DISCLOSURE BD.

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

2009 JAN 16 PM 3: 22

COMMITTEE NAME (Must be same as on Statement of Orga	anization)	7			
Buller for Board		ÌГ	FORM		
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate (4)County Central Committee (5)County Candidate (6)City Candi Subdivision Candidate (8)County PAC (9)City PAC (10)School 11) Local Ballot Issue	' (<u> </u>	DR-2 (Rev. 07/2007) DISCLOSURE REPORT For Office Use Only			
CANDIDATE COMMITTEES ONLY: Candidate Name Political Party (if applicable) Tyler Buller		L	Comm. # //25 4 Logged In S Scanned Computer		
Office Sought Johnston Community School District School Board District (if Senate or House)			Audited		
Late reports are subject to possible civil and criminal penalties. Pu	rsuant to Iowa Code sections 68B.32A	(7) and 68	8A.401(3), the candidate, for a		
Tyler Buller	515-975-0191	J	an. 16, 2009		
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	-	DATE SIGNED		
I AM FILING A Jan. 19, 2009	REPORT FOR (1) ELECTION	/(2)NON.	FI ECTION YEAR		
(report date)	Indicate by		ELECTION TEAR.		
□CHECK IF AMENDMENT TO REPORT DATED	· · · · · · · · · · · · · · · · · · ·		nmittees, enter Date of Election		
		Sept. 9,			
✓ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR 3 is filed.)			ty & Local Committees, enter County in Election is held		
STATEMENT OF CASH ON HAND)				
CASH ON HAND at the beginning of the reporting period. (Tot committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fire.)	ash on hand at the end	\$	402.32		
ADD TOTAL MONEY TAKEN IN THIS PERIOD		,	***************************************		
Schedule A: Cash Contributions total (Attach Schedu	ule A) (*also see in-kind below)		25.00		
Schedule F: Loans Received total (Attach Schedule	F)		0.00		
Schedule H: Total Sales of Campaign Property (Atta	ch Schedule H)		0.00		
(Schedule H applies to Candidates' Comn	nittees Only) SUB-TOTAL	\$	427.32		
SUBTRACT TOTAL MONEY SPENT THIS PERIOD					
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans below).		184.81		
Schedule F: Loan Repayments total (Attach Schedul	e F)		242.51		
CASH ON HAND at the end of this reporting period (if final rep	ort balance must be zero)	\$	0.00		
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	0.00		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched			57.49		
*OUTSTANDING LOANS (From Schedule F - Attach Schedul	·		0.00		
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES ✓ NO		
CANDIDATE COMMITTEES ONLY:					
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attac	\$	0.00			
STATE COMMITTEES: Submit a reconciled campaign accour	nt bank statement in January of eacl	year.			

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Nev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		ECK THIS BOX IF
Buller for Board		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	DAG ID NILINADED				
RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
(MM/DD/YR)	AND PAC CHECK		TO CANDIDATE*	RECEIVED	FUND-
	NUMBER		(if applicable)		RAISER INCOME
	ID#		 		INCOME
09/12/08		Connie McKeen		\$25	
07/12/00	CK#	9326 Hickory Drive			
	ID#	Urbandale, IA 50322			
	10#				
	CK#				
	ID#				
	CK#				
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	CK#		aunt		
			SUB-TOTAL	25	
				\$ ²⁵	
		TOTAL (if last page	of this schedule)		

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

SCHEDULE

MONETARY

Reset Form

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

AMENDING FORM

COMMITTEE NAME	(Must be same as on Statement of	Organization)

Buller for Board

L	CANDIDATE	NAME AND ADDRESS TO WHOM	PURPOSE	AMOUNT
DATE EXPENDED (MM/DD/YR)	ID NUMBER (if applicable) AND PAC CHECK NUMBER	EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	EXPENDED
09/24/08	ID# CK#1093	Carter Printing 1739 East Grand Avenue Des Moines, IA 5016	Printing	\$ 139.92
09/30/08	ID# CK# _{debit}	Bank of America 8525 Meredith Drive Urbandale, IA 50322	Monthly maintenance fee	11.00
12/15/08	ID# CK# debit	Office Depot 4347 Merle Hay Road Des Moines IA 50310	Christmas cards	33.89
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK# _{debit}			
	ID#			1
	CK# debit			
	<u> </u>		SUB-TOTAL	\$ 184.81

▶ 184.81

TOTAL (if last page of this schedule)

\$ 184.81

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

1	1
Page _	of ¹

F	OR INSTRUCTIONS, SEE BACK OF FORM	SCHEDULE E	IN-KIND
	COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 06/97)	CONTRIBUTIONS
	Buller for Board		
	Reset Form		K THIS BOX IF DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
01/15/09	Tyler Buller 7804 Goodman Circle Urbandale, Iowa 50322	Self	Forgiven loan (see sched F.)	\$ 57.49	
			SUB-TOTAL	\$ 57.49	
			TOTAL (if last	\$	
			page of this	57.49	
			schedule)	77.19	

Page 1 of 1 (for Schedule F)

^{*}Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

COMMITTEE NAME(Must be same	as on Statement of Organization)

Buller for Board

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 300.00

(Rev. 02/08)	LOANS RECEIVED & REPAID			
CHECK THIS BOX IF AMENDING FORM				

SCHEDULE

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$
		TOTAL (PART I)	\$ 300.00

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD (Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
01/15/09	Tyler Buller 7804 Goodman Circle Urbandale, Iowa 50322	Self	^{\$} 242.51

TOTAL CASH REPAYMENTS (PART II)

s 242.51

From Schedule E -- TOTAL LOANS FORGIVEN

\$ 57.49

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 0.00

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(for Schedule F)